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UTILITY
PATENT APPLICATION
TRANSMITTAL

329P1US Attorney Docket No. JOUBERT, Seun First Inventor ADJUSTABLE COVER

Only for new nonprovision	onal applications under 37 CFR 1.53(b))	Expres	s Mail Label No.			
	ATION ELEMENTS	ADI	DRESS TO:	Box Patent A		
1. X Fee Transmittal for Submit an original and and applicant claims. See 37 CFR 1.27 3. X Specification (preferred arrangeme) - Descriptive tittle - Cross Reference to so or a computer - Background of - Brief Summan - Brief Description - Detailed Description - Detailed Description - Claim(s) - Abstract of the state	Tom (e.g., PTO/SB/17) If a duplicate for fee processing) If otal Pages If of the invention Ince to Related Applications agarding Fed sponsored R & D Is sequence listing, a table, r program listing appendix If the Invention Ince to Trawings (if filed) Incription If the Disclosure Total Pages If					
	(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Other: Other:					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Group An Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
19. CORRESPONDENCE ADDRESS						
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Name (Print/Type)	Brian M. Long	Rg	istration No. (Attor	ney/Agent)	28,815	
Signature	XD, NOU			Date	July 8, 2003	

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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 375.00

Complete if Known			
Application Number			
Filing Date	Filed herewith		
First Named Inventor	JOUBERT, Seun		
Examiner Name			
Art Unit			
Attorney Docket No.	329P1US	 -	

METHOD OF	PAYMENT (check all that apply)	FEE CALCULATION (continued)					
X Check Credit	t card Money Other None	3. A	DDIT	IONA			·
Deposit Account:	— Order — —	<u>Large</u>	Entity	Smal	l Entity	Y	
Deposit		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	
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	uthorized to: (check all that apply)	1053	130	1053		Non-English specification	<u> </u>
Charge fee(s) indicate			2,520			For filing a request for ex parte reex	
	I fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior Examiner action	to
to the above-identified de	ed below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FE	E CALCULATION	1251	110	2251	55	Extension for reply within first mont	h
1. BASIC FILING FE		1252	410	2252	205	_	
Large Entity Small Entit		1253	930	2253	465	Extension for reply within third mon	th
Fee Fee Fee Fee Code (\$)	<u>Fee Description</u> Fee Paid	1254	1,450	2254	725	Extension for reply within fourth mo	1
1001 750 2001 375	Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	
1002 330 2002 165	Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260	Plant filing fee	1402	320	2402			
1004 750 2004 375	Reissue filing fee	1403	280	2403		Request for oral hearing	
1005 160 2005 80	Provisional filing fee	1451	1,510	1451		Petition to institute a public use proc	eeding
SUBTOTAL (1) (\$) 375.00 1452 110 2452 55 Petition to revive - unavoidable				looding			
2 FXTRACLAIM E	EES FOR UTILITY AND REISSUE						
2. EXTRA OLAMAT I	Fee from	1501 1,300 2501 650 Utility issue fee (or reissue)					
Total Claims 6 -20" = 0 X Fee Paid Independent 1 -3" = 0 X		1502	470	2502		Design issue fee	
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Fee Fee Fee Fe	ee Fee Description	1806	180	1806	180	Submission of Information Disclosure	e Stmt
Code (\$) Code (\$ 1202 18 2202	9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment p property (times number of properties	er
1201 84 2201	42 Independent claims in excess of 3	1809	750	2809	375	Filing a submission after final rejection	
1203 280 2203	140 Multiple dependent claim, if not paid	1810	750	2810		(37 CFR 1.129(a))	<u> </u>
1204 84 2204	42 ** Reissue independent claims over original patent					For each additional invention to be examined (37 CFR 1.129(b))	
1205 18 2205	9 ** Reissue claims in excess of 20	1801		2801		Request for Continued Examination	(RCE)
1802 900 Request for expedited examination and over original patent 1802 900 1802 900 Request for expedited examination of a design application							
SUBTOTAL (2) Other fee (specify)							
**or number previously paid, if greater; For Reisbues, sec above *Reduced by Basic Filing Fee Paid SUBTOTAL (3)					5)		
SUBMITTED BY (Complete (if applicable)							
Name (Print/Type)	Brian M. Long		gistratio		28,8		
	- 1271 / Anna	(At	tomev/A	aent)	40,0	315 Telephone (604)6	p87-5513

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July 8, 2003